

# Cutting Edge Healthcare Services Aimed at Controlling Costs

The United States ranks number one in healthcare spending in the world. As detailed in a 2019 report by the Organisation for Economic Co-operation and Development (OECD)<sup>1</sup>, the U.S. rate of spending per person was an astonishing \$11,072. And while the U.S. continues to spend the most on healthcare per person, health outcomes and quality of care rank lowest<sup>2</sup> in comparison to other high-income countries.

The U.S. has some of the highest numbers of hospitalizations from preventable causes and the highest rate of avoidable deaths compared to peer nations. This data suggests that Americans have worse access to primary and preventative care and chronic disease management as compared to other developed nations such as Switzerland, France, or Canada. While the U.S. spends the most on its healthcare system, the financial investments don't always give Americans a necessary return on top-quality healthcare.

## But what do these statistics mean in the day-to-day practice of American healthcare?

When a patient seeks care for minor urgent conditions, they initiate an episode of care that often includes follow-up visits over a 21-day period. Researchers have investigated the total cost of a care episode across the traditional arenas of care: urgent care centers, primary care offices, and emergency departments. The results show that following the first visit on Day 1, the rate of additional visits made for the original complaint ranged from 32% - 57% over the next 21 days. These follow-up visits cause the full cost of the episode to balloon to over \$800.

When a patient goes in for an initial doctor visit to engage with their primary healthcare provider, many times the visit does not end conclusively. Instead, there is an extended timeline of follow-up visits with specialty doctors, return visits to the primary care physician, lab tests, MRIs, X-Rays, or ultrasounds. All of these visits create a timeline with serious financial implications.

This cyclical movement within the system always entails a greater financial burden to the patient as well as the patient's employer. This extended timeline also requires greater use of administrative support. A study published in the *Annals of Internal Medicine* discovered that 34% of healthcare costs in the U.S. come from administrative fees alone.

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<sup>1</sup> <https://www.investopedia.com/terms/o/oecd.asp>

<sup>2</sup> <https://www.commonwealthfund.org/publications/issue-briefs/2020/jan/us-health-care-global-perspective-2019>

Each follow-up visit requires new expenses from the doctor, costs associated with testing, creates steep administrative fees, and taxes a patient's precious time and energy. Many times, after all of the back and forth of multiple appointments and tests, a patient is left with more questions than answers — requiring further spending with each new health provider. This becomes a vicious cycle of draining precious resources.

## The inefficiency of the American healthcare system is incurring huge costs to American businesses and patients

Who is paying for all of these referral and follow-up visits? With healthcare and health insurance being the 2nd or 3rd largest expense on the income statement for businesses, the current cost trajectory cannot continue. Kaiser Family Foundation's (kff.org) 2000 Annual Health Benefits Survey reported that the average annual premiums for single and family coverage (all plans) was \$2,424 and \$6,348, respectively. While these businesses provide health insurance coverage, every year, that coverage becomes more costly.

Twenty years later, the latest Kaiser Family Foundation survey<sup>3</sup> determined the average percent of health insurance paid by employers is 82% for single coverage and 70% for family coverage. The average annual premiums for family coverage<sup>4</sup> rose 37% from \$15,545 to an exorbitant \$21,342 over 5 years from 2015 to 2020.

Where do these increased costs come from? According to a 2017 *JAMA* study, healthcare service prices, especially inpatient hospital care, made up more than 50% of the increased costs for health services. The report also revealed that outpatient hospital services and emergency room care increased costs the most of all treatment categories studied. The cost of an emergency room visit, inclusive of all health conditions, rose 6.4% over the same time period.

Is there a way to decrease the need for multiple doctor appointments, urgent care visits, emergency room admissions, and the lost time and additional bills involved in separate appointments for ultrasounds, X-Rays, lab work, EKGs, and echocardiograms?

According to the economic analysis published in 2019 in the *Journal of Telemedicine and Telecare*, "Virtual visits are an effective way to lower the total cost of care for patients with low acuity conditions."

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<sup>3</sup> <https://www.kff.org/health-costs/report/2019-employer-health-benefits-survey/>

<sup>4</sup> <https://www.investopedia.com/insurance/why-do-healthcare-costs-keep-rising/>

## Telemedicine provides financial relief for both employers and employees

*The American Journal of Emergency Medicine* released a study out of Jefferson Health in Philadelphia on the benefits of telemedicine. Their research substantiated telemedicine's cost savings ability:

"In our on-demand telemedicine program, we found the majority of health concerns could be resolved in a single consultation, and new utilization was infrequent. Synchronous audio-video telemedicine consults resulted in short-term cost savings by diverting patients from more expensive care settings."

Their research revealed that a telemedicine visit could produce net cost savings anywhere from \$19 - \$121 per visit. However, the bulk of the telemedicine cost savings came from diverting patients from emergency departments. Each time a patient was able to avoid an emergency room visit, the cost savings was anywhere from \$309 to more than \$1,500.

## COVID-19 broke down telemedicine barriers

Telemedicine was already on the rise before March 2020, when the American healthcare system technologically expanded at exponential rates in order to manage the COVID-19 pandemic. According to consumer research<sup>5</sup> done by Huron in late 2019, 35% to 40% of consumers were interested in telemedicine. With the onset of the COVID-19 pandemic, consumers' interests in healthcare from home have only increased. COVID-19 introduced many patients, employers, and brokers to telemedicine, and it's here to stay.

Doctors began doing 50 to 175 times<sup>6</sup> more telemedicine visits in 2020 than they did in previous years. Many providers threw together a telemedicine program because they had never used one before and were not otherwise planning for a huge shift into telemedicine to continue seeing patients.

But COVID-19 changed all of that. With telemedicine services more commonplace, patients were able to converse with their doctor from home, get prescriptions, understand treatment options, and discuss health issues virtually. This setup allowed virtual doctors to step in and keep Americans healthy while using convenience to create safety around health visits.

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<sup>5</sup> <https://www.huronconsultinggroup.com/expertise/healthcare/reports/healthcare-consumer-market-report>

<sup>6</sup>

<https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/telehealth-a-quarter-trillion-dollar-post-covid-19-reality#>

## Traditional telemedicine still lacks a complete healthcare experience

Traditional telemedicine looks like a virtual doctor appointment — a consultation from the comfort of your own home. Many times, these healthcare providers can offer basic health services for allergies, fever, rash, sinus problems, and stomachaches. However, there are other health issues that simply need more attention and care.

They require lab work or ultrasounds that healthcare services doctors simply cannot perform through a screen, thus requiring another in-person appointment, a time delay, and time spent driving to a facility. Traditional, incomplete telemedicine still has gaps that do not provide a full level of care for patients.

In many ways, a basic telemedicine program can look very similar to a traditional healthcare experience — once a person has a virtual appointment with a healthcare provider, a patient can enter the inefficient and inconvenient cycle of driving from place to place for appointments, further tests, and more consults because the doctor cannot offer services for a conclusive diagnosis without specific testing. Currently, one of the largest gaps in a complete telemedicine program is easy access to further tests a patient might need: X-Rays, lab tests, and ultrasounds.

For example, a busy mom with multiple children does a virtual doctor's visit. While this traditional telemedicine visit is helpful, perhaps the healthcare provider realizes that one of the sick children needs more testing to reach a thorough diagnosis.

At this point, additional tests require driving all the kids to and from other doctor visits or clinics, now exposing all the children to potential germs, spending hours in waiting rooms or for test results, potentially taking time off of work, and booking a follow-up doctor's appointment. The initial virtual appointment is helpful, but it is not a complete, cost-efficient, time-effective healthcare experience.

## Lack of testing in traditional telemedicine

According to the *Journal of the American Medical Association* for internal medicine, telemedicine companies fail to routinely follow recommended care guidelines. This is especially true when the guidelines call for imaging or lab testing, because they are unable to perform these tests over the phone or via Zoom.

Studies of typical telemedicine encounters show that up to 85% of the time, when testing was part of the clinical guidelines, no testing was done. Instead, they just skip them or send patients on to urgent care facilities or the emergency room, which defeats the cost-saving opportunity of a virtual doctor visit.

The most innovative telemedicine healthcare provider uses a mobile care unit that arrives directly at the patient's home immediately after a virtual care visit to perform necessary testing for a complete diagnosis. EZaccessMD drives to the patient's bedside to do the required tests needed by the healthcare provider. With this testing, they are able to bring the doctor in on a consult, and the patient gets the benefit of comprehensive care on day one. With such a comprehensive approach that first day, the potential larger or catastrophic issues are caught immediately while they are still small and manageable.

Researchers have identified that when a patient initiates an episode of care, multiple follow-up visits ensue over a 21-day period. With a mobile testing unit on day one, the 21-day period shortens significantly, which in turn saves the patient and their employer significant expense. This also shortens recovery time, lost time at work, and lessens medical bills from multiple different follow-up visits.

If a patient is not able to get diagnostics on day one and moves towards the 21-day episode, the cost of care can balloon to over \$800. These follow-up visits often include diagnostic imaging and lab testing that EZaccessMD performs as standard care in the home. With a complete telemedicine approach like EZaccessMD, the patient incurs far fewer trips to traditional care sites and receives faster intervention in the course of their illness. Early in the trajectory of an illness, this complete form of telemedicine has removed duplicative cost, delay, travel, paperwork, and hassle.

EZaccessMD maintains a high standard of quality care with this innovative telemedicine program. They actually outperform the quality measures of traditional telemedicine providers with a net promoter score of 86, one of the highest in any sector, and especially within healthcare.

The President of a large nursing home describes the type of telemedicine EZaccessMD offers:

“Our employees are receiving care more quickly, at their own convenience, and at no cost to them. This care model allows our employees to mitigate common low-acuity conditions before they become more serious. We have also reduced health insurance claims and absenteeism.”

## **Mobile Urgent Care is the most innovative solution for complete telemedicine**

Speaking with a doctor from the comfort of a couch is a much-needed industry evolution. However, the greater benefit is when that doctor can send a clinician to a home after a virtual appointment to get tests done quickly and efficiently for the patient. Mobile Urgent Care combines telehealth services with the clinicians that actually come to a patient's home.

After an online doctor's appointment, instead of the patient calling to set up a separate appointment to drive to a facility for X-Rays, lab tests, or ultrasounds, a mobile care unit drives directly to the patient's location to provide any of the services the doctor has requested.

Currently, the only healthcare provider offering telemedicine and Mobile Urgent Care is EZaccessMD. Company-owned vehicles supplied with equipment are driven to the patient's home in under two hours. The licensed medical technologist comes to the patient with multiple equipment options in order to administer a wide variety of diagnostic tests, including X-Rays, ultrasounds, and labs.

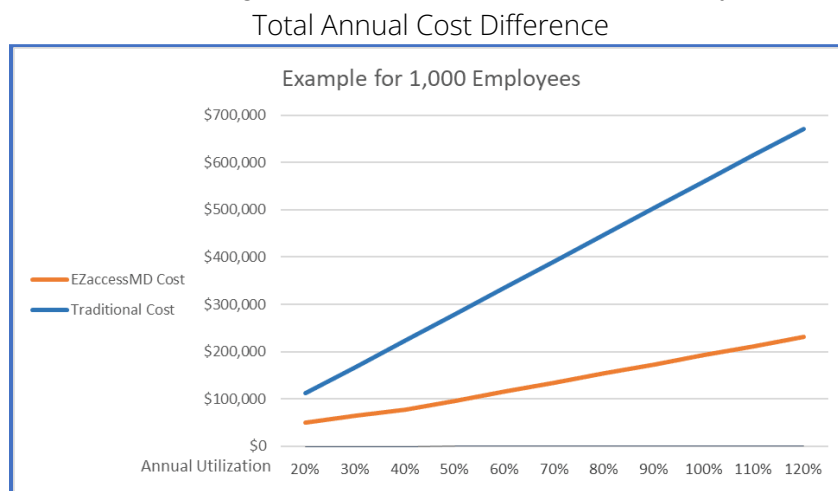
The technologist, along with their testing equipment, becomes the eyes, ears, hands...even the radiology facility and lab, for the tele-physician. The information gathered allows the physician to make a fully informed diagnosis and have a conversation with the patient about an appropriate care plan while prescriptions are ordered electronically.

The chart below shows additional care found in EZaccessMD's Mobile Urgent Care:  
(add in the chart from <https://ezaccessmd.com/the-ez-difference/> )

At-home delivery culture is exploding in every other consumer category, particularly during the pandemic. Healthcare needs to engage the consumer in this way as well. EZaccessMD is transforming how healthcare is purchased and delivered by bringing complete, comprehensive care directly to the patient's home.

## Benefits and savings with EZaccessMD

EZaccessMD bases their rates per employee, per month, and is all-inclusive with no additional charges after accounting for the entire episode of care. This includes the 7% of cases that they refer to another setting. EZaccessMD's cost per medical episode is \$281 because of their ability to deliver diagnostics on day 1. Savings of this magnitude add up fast for employers, as shown below in Exhibit 3. Costs avoided for each EZaccessMD episode of care average \$816, meaning that with an average EZaccessMD cost of \$281, employers save \$535 per visit.



All-inclusive care with home visits is a reality that translates into healthier and more productive employees, and produces significant savings for employers as well. Cutting the cost per episode of care by more than two-thirds, without compromising on quality, saves money and provides more opportunities to focus on what really matters, both in and out of the office.

Another significant source of savings occurs because visits to brick and mortar facilities are drastically reduced. Instead, all diagnostics are done at one time in the home, removing the cost for referrals to specialists. The ability for a patient to stay in their home when they are ill and cut out time spent managing referral appointments creates results that can be diagnosed and managed much faster.

## EZaccessMD is the only telemedicine provider to offer Mobile Urgent Care

When barriers to care such as distance, time, and cost are removed, patients receive care sooner, recover sooner, and incur fewer costs. This is what EZaccessMD is all about. Their transformative healthcare delivery model helps both the employer and employee spend less on healthcare while maintaining quality care and improving the patient experience. They circumvent the status quo by offering employees both telemedicine and on-demand, Mobile Urgent Care in one healthcare offering.

Their solution optimizes healthcare plans and is an extension to direct primary care by reducing unnecessary emergency room and other facility visits. EZaccessMD operates outside of a health plan network, which makes it easy and free for employees to virtually, and in person, see health professionals who provide high-quality care, a better experience, and lower costs.

The combination of mobile diagnostics and telemedicine services allows patients to receive treatment on their schedule without the need to schedule an appointment, travel to get lab work done, or sit in a waiting room. EZaccessMD is revolutionizing the way patients get affordable care.

## Why EZaccessMD is the leader in telemedicine

EZaccessMD was founded in 2016 as an expansion of a mobile medical imaging company in Rochester, New York. When they were at the bedside of nursing home patients, they recognized that they could do more diagnostic tests for a broader audience. They also saw traditional telemedicine as incomplete.

When a virtual visit would require additional diagnostic testing, the patient was simply referred to a brick-and-mortar facility which restarted the entire episode of care and resulted in additional costs to the care equation. Their model of combining telemedicine with Mobile Urgent Care is

unique and much needed. EZaccessMD is on track to expand to all 50 States in the next three years, bringing cost-efficient healthcare to communities across the country.

**Contact EZaccessMD for more information:**

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